



(PTO ASSISTANCE)

Application : 09/925,777 Examiner : Deberadinis GAU : 2836
From: MR Location: IDC FMF FDC Date: 10-19-05

DOC CODE	DOC DATE	MISCELLANEOUS
<input checked="" type="checkbox"/> 1449/802	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: NO PRO-892/444 forms inside
the file.

Please supply.

Thank you,
LJR

[XRUSH] **RESPONSE:** _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04